

## STATE OF SOUTH DAKOTA CLASS SPECIFICATION

**Class Title:** Disability Claims Specialist

**Class Code:** 10534

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### **A. Purpose:**

Directs and participates in disability claims quality assurance reviews and evidentiary hearings to provide expert determinations in disability claims cases.

### **B. Distinguishing Feature:**

Disability Claims Specialist directs and participates in quality assurance reviews, evidentiary hearings, and establishment and maintenance of medical relations programs. This position frequently reviews work of examiners and clerical staff.

### **C. Functions:**

*(These are examples only; any one position may not include all of the listed examples nor do the listed examples include all functions which may be found in positions of this class.)*

1. Conducts a medical-relation's program with the medical community to ensure availability of quality medical evidence.
2. Plans, organizes, and directs the quality assurance review system of medical disability decisions by selecting a random sample of examiner determinations to guarantee consistency, validity, and quality control of claims decisions.
3. Conducts hearings to obtain valid testimony needed for proper disability claims determinations.
4. Adjudicates reconsideration cases through review, appraisal, analysis, and a summary of evidence to determine sufficiency, consistency, and validity.
5. Trains examiners in quality of approach, alternate methods, actual medical contacts, and source and selection procedures for medical evidence to provide examiners with necessary information and handling disability claims.
  - a. Inventories and analyzes medical sources available to determine consultant specialties or problem areas by conducting special studies.
  - b. Reviews, analyzes, and reports patterns, trends, and performance in internal and federal cases returned with substantive questions.
  - c. Conducts special studies to evaluate performance, and to make improvements in staffing patterns, and implementation of office goals.
6. Analyzes and reports internal and federal case patterns, trends, and performance to ensure quality and compliance with program policies and goals.
7. Recruits physicians, as medical examiners, to provide needed personnel for consultative examination.
8. Performs other work as assigned.

### **D. Reporting Relationships:**

Typically this position does not supervise, but does review disability claims examiners and disability claims senior examiners determinations for accuracy, validity, and consistency. This position also assigns and evaluates record keeping duties of clerical support positions.

#### **E. Challenges and Problems:**

Challenges include reviewing and analyzing a random selection of examiner decisions to maintain a high level of quality assurance, consistency, and validity; conducting evidentiary hearings, obtaining and appraising testimony, and preparing written decisions, by establishing findings of fact, resulting in accurate redeterminations; maintaining effective working relationships with the medical community to ensure availability of adequate medical evidence; and recruiting and educating an adequate number of physicians and related medical personnel to work as consultative examiners.

#### **F. Decision-making Authority:**

Decisions include determining specific cases to audit, claim credibility, acceptability of medical documentation, and appropriateness of procedures followed by claims examiners.

Decisions referred include reviews that will result in an increase of disability benefits, changes in sample size, and special studies on trends or actions for approval.

#### **G. Contact with Others:**

Daily contact with claims examiners to ensure claim accuracy; agency and outside medical sources to discuss or obtain medical information; and administrators and clerical staff to discuss problems and complex issues, or to answer questions and provide information. Frequent contact with judges, attorneys, members of congress, and claimants or their representatives to secure or provide information regarding the claims process, and with social security and other state agencies to develop good working relations and to obtain documentation of claims information.

#### **H. Working Conditions:**

The incumbent works in a typical office environment.

#### **I. Knowledge, Skills and Abilities:**

Knowledge of:

- medical community resources available that pertain to claims programs;
- medical and vocational evaluation techniques;
- federal and state statutes and methods and procedures utilized in adjudication issues;
- problems and practices related to the administration of the federal and state disability programs; vocational requirements and opportunities;
- medical, psychological, and vocational resources and requirements;
- medical terminology and medical concepts applicable to tests and procedures used in diagnosis and treatment;
- rehabilitative and other social service agencies;
- functional limitations of physiological and psychological impairments.

Ability to:

- establish effective public relations with physicians and other medical personnel;

- review, analyze, and interpret random examiner determinations for consistency and validity;
- write complex and understandable reports;
- train, motivate, and deal with people;
- exercise good judgement in separation of fact and opinion;
- deal tactfully with others;
- communicate sufficiently to gather information from physicians and medical staff and facilities to ensure accurate determinations have been made.